510(k) Notification – Tracheobronchial Prosthesis Vascular Architects, Inc. aSpire Covered Stent and Delivery Catheter

MAR 1 3 2001

APPENDIX A 510(K) SUMMARY OF SAFETY AND EFFECTIVENESS

This summary of 510(k) safety and effectiveness information is being submitted in accordance with the requirements of SMDA 1990 and 21 CFR 807.92.

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The assigned 510(k) number is	<u> </u>
Applicant Information:	
Date Prepared:	October 5, 2000
Name: Address:	Vascular Architects, Inc. 1830 Bering Drive San Jose, CA 95112
Contact Person: Phone Number: Fax Number:	Kevin F. MacDonald (408) 392-7407 (408) 453-7970
Device Information:	
Trade Name:	Vascular Architects aSpire Covered Stent and Delivery Catheter
Common Name:	Tracheal Stent
Classification Name:	Tracheal Prosthesis
Equivalent (Predicate) Devic	es:
K000001: Boston Scientific Corporation: WALLGRAFT® Trac	cheobronchial Endoprosthesis with Unistep TM Delivery System
K961296: Boston Scientific Corporation: WALLSTENT® Track	neobronchial Endoprosthesis with Unistep TM Delivery System

Intended Use:

The Vascular Architects aSpire Covered Stent and Delivery Catheter is intended for the treatment of tracheobronchial strictures produced by malignant neoplasm and for the treatment of benign strictures after all alternative therapies have been exhausted.

K003173

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Vascular Architects, Inc.

<u>aSpire Covered Stent and Delivery Catheter</u>

Comparison To Predicate Devices:

This device has the same intended use and technological characteristics as both of the predicate devices. Device materials are similar to the WALLGRAFT and the available sizes (lengths and diameters) are within the range of both the WALLSTENT and WALLGRAFT Tracheobronchial Endoprostheses.

Non-clinical Test Results:

Comparison bench testing was conducted comparing the aSpire Covered Stent to the predicate device and device performance was found to be equivalent. Additional testing was performed to ensure that the mechanical integrity and performance are in accordance with the established design specifications.



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

MAR 1 3 2001

Mr. Kevin MacDonald Director of Regulatory and Clinical Affairs Vascular Architects, Inc. 1830 Bering Drive San Jose, California 95112

Re:

K003173

Trade Name: Vascular Architects aSpire™ Covered Stent and Delivery Catheter

Regulatory Class: II Product Code: ESW

Dated: December 22, 2000 Received: December 26, 2000

Dear Mr. MacDonald:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the current Good Manufacturing Practice requirement, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic (QS) inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4595. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "http://www.fda.gov/cdrh/dsmamain.html".

Sincerely yours,
Male A Mulherson

Celia M. Witten, Ph.D., M.D.

Director

Division of General, Restorative and Neurological Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure

Indications for Use

510(k) Number ((if known):
Device Name:	Vascular Architects aSpire™ Covered Stent and Delivery Catheter
Indications for U	Jse:
treatme	scular Architects aSpire Covered Stent and Delivery Catheter is intended for the nt of tracheobronchial strictures produced by malignant neoplasm or for use in strictures after all alternative therapies have been exhausted.
(PLEASE I	OO NOT WRITE BELOW THIS LINE - CONTINUE ON ANOTHER PAGE IF NEEDED)
	Concurrence of CDRH, Office of Device Evaluation (ODE)
Prescription Use (Per 21 CFR 801	
	(Optional Format 1-2-96) (Optional Format 1-2-96) (Optional Format 1-2-96) (Division Sign-Off) (Division of General Estorative)
	(Division Sign-Off) Division of General estorative
	and Neurological Devices
	510(k) Number